

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

IUOE OPERATING ENGINEERS

ADDRESS (number and street)

1375 VIRGINIA DR.

☐Check if different
than previously
reported. (ACC)

FT. WASHINGTON

PA

19034

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00136739

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☒July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

04

01

2009

through

06

30

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

JAMES JAMES JONES

Signature of Treasurer

Electronically Filed by JAMES JAMES JONES

Date

07

13

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 26

Write or Type Committee Name
IUOE OPERATING ENGINEERS

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <div>2009 Y Y Y</div>		5104.23
(b) Cash on Hand at Beginning of Reporting Period	7416.64	
(c) Total Receipts (from Line 19)	43620.83	85233.24
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	51037.47	90337.47
7. Total Disbursements (from Line 31)	41910.00	81210.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	9127.47	9127.47
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

3 / 26

Write or Type Committee Name

IUOE OPERATING ENGINEERS

Report Covering the Period:

From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	43620.83	85233.24
(iii) TOTAL (add Lines 11(a)(i) and (ii)	43620.83	85233.24
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	43620.83	85233.24
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	43620.83	85233.24
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	43620.83	85233.24

DETAILED SUMMARY PAGE

of Disbursements

4 / 26

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	0.00	0.00	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	0.00	0.00	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	41910.00	81210.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	41910.00	81210.00	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	41910.00	81210.00	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 26

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	43620.83	85233.24
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	43620.83	85233.24
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 / 26

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

A.

Full Name (Last, First, Middle Initial)

ASPLEN ASPLEN FOR DA

Mailing Address P.O. BOX 463

City
DOYLESTOWN

State
PA

Zip Code
18901

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6286

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)

BERNARD BERNARD FOR FREEHOLDER

Mailing Address BOX 428

City
MT HOLLY

State
NJ

Zip Code
08060

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6337

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

BILL BILL DEWEESE CAMPAIGN COMM

Mailing Address P.O. BOX 513

City
HARRISBURG

State
PA

Zip Code
17108

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6334

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 / 26

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

A. Full Name (Last, First, Middle Initial)
BUCKS BUCKS COUNTY DEMO. COMM

Mailing Address 17 W. COURT ST.

City DOYLESTOWN State PA Zip Code 18901

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6260

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

B. Full Name (Last, First, Middle Initial)
BUCKS BUCKS COUNTY DEMOCRATE COMM

Mailing Address 17 WEST COURT ST

City DOYLESTOWN State PA Zip Code 18901

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6288

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
BUCKS BUCKS VICTORY

Mailing Address 27 HIGH RD

City LEVITTOWN State PA Zip Code 19056

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6321

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)

3250.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 / 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

A. Full Name (Last, First, Middle Initial)
CAMILLE CITIZENS COMM. FOR C. GEORGE

Mailing Address 125 SPRING ST

City HOUTZDALE State PA Zip Code 16651

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6333

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	0	9

Amount of Each Disbursement this Period

500.00

B. Full Name (Last, First, Middle Initial)
FRAN COMM. TO ELECT FRAN SHIELDS

Mailing Address 325 CHESTNUT ST STE. 515

City PHILADELPHIA State PA Zip Code 19106

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6317

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	0	9

Amount of Each Disbursement this Period

500.00

C. Full Name (Last, First, Middle Initial)
RICK COMM. TO ELECT RICK TAYLOR

Mailing Address P.O. BOX 866

City AMBLER State PA Zip Code 19002

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6323

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	0	9

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 / 26

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

A. Full Name (Last, First, Middle Initial)
MIKE COMM. TO RE-ELECT MIKE STACK

Mailing Address 113 S. 21ST STREET

City PHILA. State PA Zip Code 19103

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2009 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6330

Date of Disbursement

05 / 18 / 2009

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
BILL COMM TO ELECT BILL KELLER

Mailing Address P.O. BOX 37531

City PHILA State PA Zip Code 19148

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2009 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6332

Date of Disbursement

05 / 19 / 2009

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
JAMES COMM TO ELECT JIM LYNN

Mailing Address P.O. BOX 3010

City BLUE BELL State PA Zip Code 19422

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2009 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6263

Date of Disbursement

04 / 02 / 2009

Amount of Each Disbursement this Period

400.00

SUBTOTAL of Disbursements This Page (optional)

2400.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 / 26

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

A. Full Name (Last, First, Middle Initial)
DEMOCRATIC DEM. PARTY OF DEL.

Mailing Address P.O. BOX 2065

City State Zip Code
WILMINGTON DE 19899

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2009 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6335

Date of Disbursement

05 / 19 / 2009

Amount of Each Disbursement this Period

500.00

B. Full Name (Last, First, Middle Initial)
DEMOCRATIC DEMO. CITY COMM.

Mailing Address 1421 WALNUT ST

City State Zip Code
PHILA PA 19102

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2009 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6364

Date of Disbursement

06 / 22 / 2009

Amount of Each Disbursement this Period

560.00

C. Full Name (Last, First, Middle Initial)
DEMOCRATS DEMO CAMPAIGN COMM OF PHILA

Mailing Address 1421 WALNUT ST

City State Zip Code
PHILADELPHIA PA 19102

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2009 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6308

Date of Disbursement

05 / 05 / 2009

Amount of Each Disbursement this Period

1050.00

SUBTOTAL of Disbursements This Page (optional)

2110.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 / 26

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

A. Full Name (Last, First, Middle Initial) DIPASQUALE DIPASQUALE FOR THE 95TH	Transaction ID: SB29.6373 Date of Disbursement
Mailing Address P.O. BOX 7365	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 5 / 2 0 0 9</div> </div>
City STEELTON State PA Zip Code 17113	Amount of Each Disbursement this Period
Purpose of Disbursement CAMPAIGN CONTRI.	<div>500.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) DOHERTY DOHERTY FOR MAYOR COMM.	Transaction ID: SB29.6319 Date of Disbursement
Mailing Address P.O. BOX 205	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 4 / 2 0 0 9</div> </div>
City SCRANTON State PA Zip Code 18501	Amount of Each Disbursement this Period
Purpose of Disbursement CAMPAIGN CONTRI.	<div>300.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) RON DONATUCCI 2003 COMM	Transaction ID: SB29.6363 Date of Disbursement
Mailing Address 1616 SOUTH BROAD ST	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 6 / 2 0 0 9</div> </div>
City PHILA State PA Zip Code 19145	Amount of Each Disbursement this Period
Purpose of Disbursement CAMPAIGN CONTRI.	<div>1350.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

2150.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 / 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

A. Full Name (Last, First, Middle Initial)
THOMAS ELECTION FUND OF THOMAS GIBLIN

Mailing Address P.O. BOX 43062

City MONTCLAIR State NJ Zip Code 07043

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2009 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6322

Date of Disbursement

05 / 18 / 2009

Amount of Each Disbursement this Period

500.00

B. Full Name (Last, First, Middle Initial)
JAMES FIRM OF US TAX CONSULTANTS

Mailing Address 2801 MAXWELL ST.

City PHILA. State PA Zip Code 19136

Purpose of Disbursement
ACCOUNTANT

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2009 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6272

Date of Disbursement

04 / 09 / 2009

Amount of Each Disbursement this Period

600.00

C. Full Name (Last, First, Middle Initial)
JAMES FIRM OF US TAX CONSULTANTS

Mailing Address 2801 MAXWELL ST.

City PHILA. State PA Zip Code 19136

Purpose of Disbursement
ACCOUNTANT

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2009 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6312

Date of Disbursement

05 / 11 / 2009

Amount of Each Disbursement this Period

150.00

SUBTOTAL of Disbursements This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 / 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

A.

Full Name (Last, First, Middle Initial)

JAMES FIRM OF US TAX CONSULTANTS

Mailing Address 2801 MAXWELL ST.

City
PHILA.

State
PA

Zip Code
19136

Purpose of Disbursement
ACCOUNTANT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6362

Date of Disbursement

/ /

Amount of Each Disbursement this Period

150.00

B.

Full Name (Last, First, Middle Initial)

ANN FRIENDS OF ANN MCHALE

Mailing Address 750 BARRYMORE LN

City
BETHLEHEM

State
PA

Zip Code
18017

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6305

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

BOB FRIENDS OF BOB MENSCH

Mailing Address 624 HAZELHURST RD

City
MERION STATION

State
PA

Zip Code
19066

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6292

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

1150.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 / 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

A. Full Name (Last, First, Middle Initial)
BRENDEN FRIENDS OF BRENDEN BOYLE

Mailing Address 9741 CHAPEL RD.

City PHILADELPHIA State PA Zip Code 19115

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2009 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6354

Date of Disbursement

06 / 09 / 2009

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
CATHLEEN FRIENDS OF CATHLEEN REBAR

Mailing Address 135 OAKDALE AVE

City EAGLE State PA Zip Code 19403

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2009 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6295

Date of Disbursement

04 / 21 / 2009

Amount of Each Disbursement this Period

500.00

C. Full Name (Last, First, Middle Initial)
DAVID FRIENDS OF DAVID ZAIGER

Mailing Address 415 ERIE AVE

City QUAKERTOWN State PA Zip Code 18951

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2009 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6291

Date of Disbursement

04 / 20 / 2009

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 / 26

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

A. Full Name (Last, First, Middle Initial)
DAVID FRIENDS OF DAVID ZALSEE

Mailing Address 415 ERIE AVE

City QUAKERTOWN State PA Zip Code 18951

Purpose of Disbursement
CAMPAIGN CONTRI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2009 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6313

Date of Disbursement

05 / 13 / 2009

Amount of Each Disbursement this Period

500.00

B. Full Name (Last, First, Middle Initial)
ED FRIENDS OF ED PAWAUSKI

Mailing Address 1101 HAMILTON ST.

City ALLENTOWN State PA Zip Code 18101

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2009 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6273

Date of Disbursement

04 / 13 / 2009

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
JACK FRIENDS OF JACK WHELAN

Mailing Address 712 W. MCDADE BLVD

City MILMONT PARK State PA Zip Code 19078

Purpose of Disbursement
CAMPAIGN CONTRI

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2009 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6279

Date of Disbursement

04 / 15 / 2009

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 / 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

A.

Full Name (Last, First, Middle Initial)

JONATHAN FRIENDS OF JONATHAN SAIDEL

Mailing Address 2001 MARKET ST STE. 2900

City
PHILADELPHIAState
PAZip Code
19105Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6342

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	2	/	2	0	0	9

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

KELLY FRIENDS OF KELLY WALL

Mailing Address P.O. BOX 172

City
EAGLEVILLEState
PAZip Code
19426Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6284

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	5	/	2	0	0	9

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

KELLY FRIENDS OF KELLY WALL

Mailing Address P.O. BOX 172

City
EAGLEVILLEState
PAZip Code
19426Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6307

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	0	9

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 / 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

A. Full Name (Last, First, Middle Initial)
MATT FRIENDS OF MATT BRADFORD

Mailing Address P.O. BOX 349

City NORRISTOWN State PA Zip Code 19404

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2009 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6348

Date of Disbursement

06 / 02 / 2009

Amount of Each Disbursement this Period

500.00

B. Full Name (Last, First, Middle Initial)
MORRISVILLE FRIENDS OF MORRISVILLE DEMO.

Mailing Address 115 GRANDVIEW AVE

City MORRISVILLE State PA Zip Code 19067

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2009 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6266

Date of Disbursement

04 / 08 / 2009

Amount of Each Disbursement this Period

500.00

C. Full Name (Last, First, Middle Initial)
PAUL FRIENDS OF PAUL PANEPINTO COMM

Mailing Address 700 SANSOM ST.

City PHILADELPHIA State PA Zip Code 19109

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2009 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6297

Date of Disbursement

04 / 27 / 2009

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 / 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

A. Full Name (Last, First, Middle Initial)
ROXANN FRIENDS OF ROXANN COVINGTON

Mailing Address 2112 WALNUT ST

City PHILADELPHIA State PA Zip Code 19103

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6268

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
DUCE FRIENDS OF SHERIFF D. DONNELLY

Mailing Address 410 OURHILL AVE.

City PHILA State PA Zip Code 19116

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6274

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
STEPHEN FRIENDS OF STEPHEN BARRAN

Mailing Address 12 BERNARD ST

City ASTON State PA Zip Code 19018

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6271

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 / 26

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

A. Full Name (Last, First, Middle Initial)
TED FRIENDS OF TED ERICKSON

Mailing Address P.O. BOX 564

City DREXEL HILL State PA Zip Code 19026

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6302

Date of Disbursement

/ /

Amount of Each Disbursement this Period

300.00

B. Full Name (Last, First, Middle Initial)
TIM FRIENDS OF TIM SEIP COMM

Mailing Address 7 MAPLE AVE

City PINE GROVE State PA Zip Code 17963

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6331

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

C. Full Name (Last, First, Middle Initial)
CHRISTINE FRIENDS TO ELECT C TARTAGLIONE

Mailing Address 800 N 3RD STREET - 4TH FLR.

City HARRISBURG State PA Zip Code 17102

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6339

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1200.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 / 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

A.

Full Name (Last, First, Middle Initial)

MIKE FRIENDS TO ELECT MIKE MCGEEHAN

Mailing Address 4401 COTTMAN AVE

City
PHILA.

State
PA

Zip Code
19135

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6265

Date of Disbursement

04 / 02 / 2009

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

JOSH JOSH SHAPIRO FOR STATE REP

Mailing Address P.O. BOX 162

City
ABINGTON

State
PA

Zip Code
19001

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6359

Date of Disbursement

06 / 11 / 2009

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

KILLION KILLION VICTORY COMM

Mailing Address 115 W. STATE ST - STE 301

City
MEDIA

State
PA

Zip Code
19063

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6368

Date of Disbursement

06 / 24 / 2009

Amount of Each Disbursement this Period

350.00

SUBTOTAL of Disbursements This Page (optional)

1850.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 / 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

A.

Full Name (Last, First, Middle Initial)

LINDA LINDA A CARTISANO FOR JUDGE

Mailing Address 3410 TYSON RD.

City State Zip Code
 NEWTOWN SQUARE PA 19073

Purpose of Disbursement
 CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6356

Date of Disbursement

06 / 11 / 2009

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

MIKE MIKE STURLA FOR STATE REP.

Mailing Address P.O. BOX 206

City State Zip Code
 LANCASTER PA 17608

Purpose of Disbursement
 CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6352

Date of Disbursement

06 / 04 / 2009

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MONTGOMERY MONTGOMERY COUNTY DEMO COMM

Mailing Address 14W. MARSHALL ST.

City State Zip Code
 NORRISTOWN PA 19401

Purpose of Disbursement
 CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6270

Date of Disbursement

04 / 08 / 2009

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 22 / 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

A.

Full Name (Last, First, Middle Initial)

MONTGOMERY MONTGOMERY COUNTY DEMO COMM

Mailing Address 14W. MARSHALL ST.

City NORRISTOWN State PA Zip Code 19401

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2009 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6365

Date of Disbursement

06 / 24 / 2009

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

FRANK NEIGHBORS TO REELECT DICICCO

Mailing Address P.O. BOX 33626

City PHILA. State PA Zip Code 19107

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2009 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6259

Date of Disbursement

04 / 02 / 2009

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

O'CONNER O'CONNER FOR JUDGE COMM.

Mailing Address 398 WYOMING AVE

City KINGSTON State PA Zip Code 18704

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2009 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6309

Date of Disbursement

05 / 08 / 2009

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 23 / 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

A. Full Name (Last, First, Middle Initial)
OWEN O. ROBERTS TAX PAYER ALLIANCE

Mailing Address 12 COUNTRY LN

City POTTSTOWN State PA Zip Code 19405

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6326

Date of Disbursement

05 / 18 / 2009

Amount of Each Disbursement this Period

500.00

B. Full Name (Last, First, Middle Initial)
AFL-CIO PENNA AFL-CIO COPE

Mailing Address 319 MARKET ST

City HARRISBURG State PA Zip Code 17101

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6369

Date of Disbursement

06 / 25 / 2009

Amount of Each Disbursement this Period

300.00

C. Full Name (Last, First, Middle Initial)
PHILADELPHIA PHILADELPHIANS FOR GREEN

Mailing Address 7730 RICHARD ST

City PHILA. State PA Zip Code 19152

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6361

Date of Disbursement

06 / 16 / 2009

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

1300.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 / 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

A.

Full Name (Last, First, Middle Initial)

REPUBLICAN REPUBLICAN CITY COMM.

Mailing Address 1700 BENJAMIN FRANKLIN PKWY

City
PHILA

State
PA

Zip Code
19103

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6311

Date of Disbursement

05 / 11 / 2009

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

SCJA SCJA CONF. SPEC. COURT JUDGE

Mailing Address 1950 BERGDOLL

City
BOOTHWYN

State
PA

Zip Code
19061

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6340

Date of Disbursement

06 / 02 / 2009

Amount of Each Disbursement this Period

250.00

C.

Full Name (Last, First, Middle Initial)

SOUTHAMPTON SOUTHAMPTON REPUBLICAN COMM

Mailing Address 1261 BUSTLETON PIKE

City
FEASTVILLE

State
PA

Zip Code
19053

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6300

Date of Disbursement

04 / 29 / 2009

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 25 / 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

A.

Full Name (Last, First, Middle Initial)

POLICE CHIEFS SOUTHEASTERN PA. POLICE CHIEFS

Mailing Address 703 DAYLEY RD

City
LANGHORNE

State
PA

Zip Code
19049

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6366

Date of Disbursement

06 / 24 / 2009

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

SPRINGFIELD SPRINGFIELD REP. PARTY

Mailing Address P.O. BOX 423

City
SPRINGFIELD

State
PA

Zip Code
19064

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6278

Date of Disbursement

04 / 13 / 2009

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

SWEENEY SWEENEY FOR FREEHOLDER

Mailing Address 300 N. MORRON AVE

City
WENONAH

State
NJ

Zip Code
08090

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6261

Date of Disbursement

04 / 02 / 2009

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 26 / 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

IUOE OPERATING ENGINEERS

A.

Full Name (Last, First, Middle Initial)

WARRINGTON WARRINGTON DEMO ORGANIZATION

Mailing Address 100 FIDDLELEAF LN

City
WARRINGTON

State
PA

Zip Code
18976

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.6275

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

41410.00